

42 CFR  
440.170

EYEGLASS SERVICES

LIMITATIONS

The following services are excluded from coverage:

1. Oversize, exclusive, or specialty lenses;
2. Extended wear contact lenses;
3. Sun glasses or dark tint;
4. Any frame other than basic metal or plastic;
5. Lenses that are not for indoor/outdoor day/night use.
6. The Agency may exceed the limitations on existing covered services to the extent allowed by law, if its medical staff determines:
  - a. that the proposed services are medically appropriate; and
  - b. that the proposed services are more cost effective than alternative services.

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TN No. 98-003  
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TN No. 89-23

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42 CFR      DIAGNOSTIC, SCREENING, PREVENTIVE AND  
440.130      REHABILITATIVE SERVICES

LIMITATIONS

Diagnostic and Rehabilitative Mental Health Services

Diagnostic and rehabilitative mental health services are limited to medically necessary services designed to promote the client's mental health, reduce the client's mental disability, and restore the client to the highest possible level of functioning.

1. Services include diagnostic evaluation, psychological testing, individual therapy, group therapy, medication management, day treatment and skills development services.

Skills development services means rehabilitative services designed to (1) assist individuals to develop competence in basic living skills in the areas of food planning, shopping, food preparation, money management, mobility, grooming, personal hygiene and maintenance of the living environment, and appropriate compliance with the medication regimen; (2) assist individuals to develop community awareness, and (3) assist individuals to develop social skills including teaching communication and socialization skills and techniques. Skills development services may also include supportive counseling directed toward eliminating psychosocial barriers that impede the individual's ability to function successfully in the community.

2. Diagnostic and rehabilitative mental health services are covered benefits when provided by or through a comprehensive mental health treatment center licensed in accordance with Sections 63-35a-1 through 16, Utah Code Annotated 1953, as amended.
3. Services are recommended by a licensed practitioner of the healing arts and delivered according to a plan of care.

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42 CFR  
440.130

DIAGNOSTIC AND REHABILITATIVE SERVICES

LIMITATIONS (continued)

Diagnostic and Rehabilitative Mental Health Services

4. Services are provided by or under the supervision of a licensed practitioner of the healing arts, including a licensed physician, licensed psychologist, licensed social worker, registered nurse with training or experience in psychiatric nursing, licensed social service worker, or licensed marriage and family therapist, practicing within the scope of their license in accordance with Title 58 of the Utah Code Annotated 1853, as amended.

Telehealth mental health is a complementary method of delivering traditional mental health services. The telehealth mode of delivery is reserved for rural clients where distance and travel time create difficulty with access to needed psychiatric and other mental health therapy services. Telehealth is designed to improve client access to mental health care in rural areas of Utah.

Limitations

1. Telehealth mental health services are limited to clients residing in rural areas of Utah.
2. Telehealth mental health services are limited to a telehealth site that provides audio and video communication between the provider and the client.
3. Telehealth mental health services are limited to psychiatric evaluations, on-going physician medication management services, and individual therapy services. Preauthorization for telehealth mental health services is not required.
4. Compliance with the Utah Health Information Network (UHN) standards for telehealth will be maintained.

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42 CFR  
440.130

DIAGNOSTIC AND REHABILITATIVE SERVICES

LIMITATIONS (continued)

Diagnostic, and Rehabilitative Mental Health Services

5. Telehealth mental health services will be billed to Medicaid by the comprehensive mental health treatment center in the same way as face-to-face mental health services are billed. Two additional modifiers, "GT" and "TR", will be added to the mental health procedure code indicating the delivery mode (telehealth) and whether a presenting provider was utilized during service.
6. The "GT" modifier will be used with the mental health procedure code to indicate that the mental health service was provided through the telehealth mode of delivery. This modifier is required to monitor utilization and evaluate the financial impact of this project. The "TR" modifier will also be used with the mental health procedure code to indicate a presenting provider was present to assist the client during the telehealth mental health service. The role of the presenting provider is to assist mentally ill clients in understanding and successfully communicating with the consultant during a telehealth service. This modifier will provide data indicating how often a presenting provider is needed to ensure successful communication the consultant and the client.

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42 CFR        OTHER DIAGNOSTIC, SCREENING, PREVENTIVE, AND REHABILITATIVE  
440.130      SERVICES

LIMITATIONS

Preventive Services Provided by the State Poison Control Center

1. Preventive services provided by the State Poison Control Center, through the Division of Family Health Services, are covered benefits for Medicaid recipients.
2. Services are provided by a physician or pharmacist practicing within the scope of their license in accordance with Title 58, Occupational and Professional Licensing, of the Utah Code Annotated 1953, as amended.
3. The Agency may exceed the limitations on existing covered services to the extent allowed by law, if its medical staff determines:
  - a. that the proposed services are medically appropriate; and
  - b. that the proposed services are more cost effective than alternative services.

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42 CFR            OTHER DIAGNOSTIC, SCREENING, PREVENTIVE, AND REHABILITATIVE  
440.130        SERVICES

LIMITATIONS

Diagnostic and Rehabilitative Substance Abuse Treatment Services

Diagnostic and rehabilitative substance abuse treatment services are covered benefits when provided by or through a substance abuse treatment program under contract with a Local County Comprehensive Substance Abuse Plan licensed in accordance with Section ~~62A~~ 2-101-116, Utah Code Annotated 1953, as amended.

1. Diagnostic and rehabilitative services are limited to medically necessary services designed to eliminate the client's substance abuse, reduce or eliminate maladaptive or hazardous behaviors, and restore the client to the highest possible level of functioning. These services may also be provided to the client's children to reduce their risk of becoming substance abusers.
2. Services include evaluation, psychological testing, medication management, individual and group therapy, individual and group substance abuse counseling, and skills development services.
3. Services must be recommended by a licensed physician, or other practitioner of the healing arts, within the scope of his practice under state law, and delivered according to a plan of care that is reviewed periodically in accordance with the Utah State Division of Substance abuse policy regarding treatment plan reviews.
4. Services may be provided by qualified providers including licensed physicians, licensed psychologists, licensed certified or clinical social workers, licensed advanced practice registered nurses, licensed marriage and family therapists, licensed professional counselors, licensed registered nurses, licensed social service workers, or licensed substance abuse counselors, as defined in Title 58, Utah Code Annotated 1953, as amended, or by other staff trained to work with substance abuse disorders who are working under the supervision of a licensed practitioner.
5. The Agency may exceed the limitations on existing covered services to the extent allowed by law, if its medical staff determines:
  - a. that the proposed services are medically appropriate; and
  - b. that the proposed services are more cost effective than alternative services.

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42 CFR            DIAGNOSTIC AND PREVENTIVE SERVICES  
440.130

DEFINITION - Telehealth Home Care for the Diabetic Patient

Telehealth home care is a complementary method of delivering traditional home health care through an electronic medium. It does not replace on-site home health care, but provides a means of monitoring and counseling patients. Understanding disease progression, and acquisition of the monitoring skills to prevent complications, disease progression, and disability will enable the individual to take responsibility for a healthy lifestyle that promotes quality mental and physical health.

LIMITATIONS

1. Telehealth home care is limited to home-bound patients with diabetes living in rural areas of Utah.
2. Telehealth home care consultations for this program are limited to 20-30% of home health care visits preauthorized by Utilization Management staff review. Ten to 12 home health care visits are usually authorized by Utilization Management for a patient. Telehealth visits for teaching and follow-up of diabetic patients will be included within these preauthorized home health care visits.
3. Diabetic patients eligible for participation in Telehealth must be able to physically and mentally use Telehealth equipment and have a desire to participate. The patient wishing to participate in Telehealth home care who is unable to use the Telehealth equipment may be included in the pilot project when there is a full time care giver consistently available who wishes to assist the patient with Telehealth.
4. Documentation of the diabetic patient condition and plan of care for follow-up must clearly indicate to the prior authorization unit that hands-on assessment is not required and/or the home health nurse determines that the patient does not meet severity of illness criteria or have complicating conditions that might limit patient inclusion in the Telehealth home care project.
5. Diabetes Telehealth home care is limited to monitoring and counseling activities provided by a registered nurse. A dietician may provide dietary counseling with physician referral. Patient-initiated anxiety calls will be the responsibility of the home health agency.
6. Compliance will be maintained with the Utah Health Information Network (UHN) standards for Telehealth.

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42 CFR            DIAGNOSTIC, SCREENING, PREVENTIVE, AND REHABILITATIVE SERVICES  
440.130

Telehealth Services for Children with Special Health Care Needs

Telehealth is a complementary method of delivering traditional physician and dietary consultation. The Telehealth mode of delivery is reserved for rural clients where distance and travel time create difficulty in access to pediatricians, physician specialists, and dieticians. This Telehealth program is designed to improve health care access for Special Health Care Needs Children residing in rural areas of Utah. Special Health Care Needs Children are defined as children who have, or are at increased risk for, disabilities from chronic physical, developmental, behavioral, or emotional conditions.

LIMITATIONS

1. Telehealth care is limited to Special Health Care Needs Children residing in rural areas of Utah.
2. The Telehealth sites chosen to participate in services for special health care needs children have the necessary technology in place. Other rural sites will be added as soon as the technology becomes available. Audio and video communication between the consulting provider and the patient will require linkage between the University of Utah Telemedicine site and Telehealth sites within the rural health clinic.
3. Scheduling of Telehealth sessions for Children with Special Health Care Needs will be limited to rural health department clinics. Preauthorization is not required.
4. Consulting providers will be limited to physicians and dieticians for this program. Nutritional assessments and counseling will be provided by certified dieticians within their scope of practice and state license. Counseling services of the dietician will be provided as medically necessary to address inappropriate diet, feeding problems, alterations in growth, risks related to drug-nutrient interaction, and metabolic disorders. Dietary counseling sessions will be limited to five sessions per calendar year.
5. Compliance will be maintained with the Utah Health Information Network (UHIN) standards for Telehealth.

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42 CFR            DIAGNOSTIC, SCREENING, PREVENTIVE, AND REHABILITATIVE SERVICES  
440.130

Telehealth Services for Children with Special Health Care Needs  
(continued)

6.    The modifier GT will be used to indicate that the health care services were provided by the Telehealth mode of delivery. This modifier is required to monitor and evaluate the financial impact of this project.
7.    The TR modifier will be used to indicate a presenting provider was in attendance at the local health department. This modifier will provide data indicating the number of times the presence of a presenting provider was required for a Telehealth session to enhance physician assessment of the patient for the consulting provider.
8.    The Agency may exceed the limitations on existing covered services to the extent allowed by law, if its medical staff determines:
  - a.    that the proposed services are medically appropriate; and
  - b.    that the proposed services are more cost effective than alternate services.

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42 CFR        OTHER DIAGNOSTIC AND PREVENTIVE SERVICES  
440.130

Diabetes Self Management Training

Diabetes Self Management is an educational process to teach the individual how to successfully manage and control diabetes. The training will increase the individual's understanding of disease progression and teach monitoring skills to prevent complications, disease progression, and disability. As a result of the training the individual will be able to identify potential diabetes-related problems, establish achievable self-care goals, and take responsibility for maintaining a healthy lifestyle that promotes quality mental and physical health. The program Coordinator will be responsible for maintaining ongoing open communication with the patient's physician. The Coordinator will inform the physician of the patient's progress, compliance, or issues of concern identified while the patient's training is in progress. Evaluation of the patient training will occur with each session, at the conclusion of training, and the program Coordinator will complete follow up with the patient several months after the training. Issues or concerns will be communicated directly to the physician.

LIMITATIONS

1. Diabetes self management is limited to a maximum of ten hours of outpatient service. Instructors eligible to provide diabetes self management training will include Utah licensed registered nurses and certified dietitians who are eligible under their scope of practice to provide counseling for patients with diabetes and monitor patient compliance with the plan of care.
2. Diabetes self management is limited only to the program that meets the National Diabetes Advisory Board standards (NDAB) and is recognized by the American Diabetes Association (ADA) or certified by the Utah Department of Health.
3. Diabetes self management is limited to that certified by the physician, under a comprehensive plan as essential to ensure successful diabetes management by the individual patient.
4. Diabetes self management is limited only to the training presented in a certified program that meets all of the NDAB standards and is recognized by the American Diabetes Association (ADA) or certified by the Utah Department of Health.
5. Diabetes self management includes group sessions, but must allow for direct face-to-face interaction between the educator and the patient, to provide opportunity for questions and personal application of learned skills.
6. Diabetes self management must be sufficient in length to meet the goals of the basic comprehensive plan of care. Individual sessions must be sufficient in number and designed to meet the medical and instructional needs of the individual.

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